**Widener University – Department of Education**

**Human Sexuality Program**

**Parent Consent for Minor Participants**

Widener University IRB Protocol Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INVESTIGATOR(S) NAME:** Heather Frost, X.X, Juan Camarena, M.S., Alice Holland, X.X., Coleen Wenzler, X.X

**STUDY TITLE:** Television’s Influence on Female Adolescents’ Sexual Identities and Behavior

**PURPOSE OF THE STUDY**

The purpose of this research study is to understand how television impacts young females’ (ages 14-18) ideas about sexuality. The researchers are also interested in understanding if young women feel represented in television shows.

My child is being asked to participate in this study because she is between the ages of 14-18, is female, and watches television.

**DESCRIPTION OF THE STUDY**

Participants will be asked to answer questions in a one on one interview with a researcher. Participants will also be asked to talk with a researcher in a small group of five, with other young women of the same age range. The questions will be about the participants television watching and how TV shows impact their ideas about sex and sexuality. Some questions will also be about how participants see themselves represented (or not) on TV shows.

The amount of time required to participate in the study is approximately 45 minutes for the individual interview . On a separate day, participants will be required to spend 1.5 hours in a small group interview. The total time to participate will be approximately two hours and fifteen minutes.

The only costs associated with the study are the cost to travel to the local study sites (gas expenses or bus fare).

**RISKS AND DISCOMFORTS**

As a participant in this study, my child may experience some discomfort when answering personal questions about her ideas about sex and sexuality and what television shows she watches. To help with this discomfort, my child’s name will not be used in the interviews and she’ll be given a number . Also, my child’s answers will be kept private from any school counselors or persons that referred me to this study. If I find the interviews too uncomfortable, then I may stop and/or not answer a question. This will remove my data from the study.

**BENEFITS**

There may be no direct benefits of participating in this study; however, the knowledge received may be of value to therapists and educators who work with adolescent females. The knowledge could also be used to help create television shows that represent accurate views of adolescent females.

**ALTERNATIVE PROCEDURES**

The alternative procedure is to not participate in the study.

**CONFIDENTIALITY**

All documents and information pertaining to this research study will be kept confidential in accordance with all applicable federal, state, and local laws and regulations. I understand that data generated by the study may be reviewed by Widener University's Institutional Review Board, which is the committee responsible for ensuring my welfare and rights as a research participant, to assure proper conduct of the study and compliance with university regulations. If any presentations or publication result from this research, I will not be identified by name.

The information collected during my participation in this study will be kept for five years.

My child’s confidentiality will be also protected by using password protected computes and all notes will be maintained in a locked filing cabinet in the university research office. Only the researchers will have access to the data.

**TERMINATION OF PARTICIPATION**

I may choose to withdraw my child from this study at any time and for any reason. If I choose to take my child out of the study, I will contact the investigator and my child’s research records will be destroyed. If I choose to stop the interviews or if my child does not complete both the individual interview and the group interview, her answers will not be included in the research.

**COMPENSATION**

I will receive a $10 WalMart gift card for my child being in this study. I will receive the gift card once my child finishes the second (group) interview. There will be no cost to me for participating in this research, other than the costs to travel to the local research sites.

**INJURY COMPENSATION**

Neither Widener University nor any government or other agency funding this research project will provide special services, free care, or compensation for any injuries resulting from this research. I understand that treatment for such injuries will be at my expense and/or paid through my medical plan.

**QUESTIONS**

All of my questions have been answered to my satisfaction and if I have further questions about this study, I may contact Heather Frost at 555-555-5555 or [hfrost@mail.widener.edu](mailto:hfrost@mail.widener.edu). If I have any questions about the rights of research participants, I may call the Chairperson of the Widener University’s Institutional Review Board at 610-499-4110.

**VOLUNTARY PARTICIPATION**

I understand that my child’s participation in this study is entirely voluntary, and that refusal to participate will involve no penalty or loss of benefits to me. I am free to withdraw or refuse consent, or to discontinue my participation in this study at anytime without penalty or consequence.

I voluntarily give my consent for my child to participate in this research study. I understand that I will be given a copy of this consent form.

Signatures:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Name (Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Signature Date

I, the undersigned, certify that to the best of my knowledge, the subject signing this consent form has had the study fully and carefully explained by me and have been given an opportunity to ask any questions regarding the nature, risks, and benefits of participation in this research study.

Heather Frost

Investigator’s Name (Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Investigator’s Signature Date

Widener University’s IRB has approved the solicitation of participants

for the study until\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Widener University – Department of Education**

**Human Sexuality Program**

Widener University IRB Protocol Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INVESTIGATOR(S) NAME:** Heather Frost, X.X, Juan Camarena, M.S., Alice Holland, X.X., Coleen Wenzler, X.X

**STUDY TITLE:** Television’s Influence on Female Adolescents’ Sexual Identities and Behavior

**PURPOSE OF THE STUDY**

The purpose of this research study is to understand how television impacts young females’ (ages 14-18) ideas about sexuality. The researchers are also interested in understanding if young women feel represented in television shows.

I am being asked to participate in this study because I am between the ages of 14-18, am female, and watch television.

**DESCRIPTION OF THE STUDY**

Participants will be asked to answer questions in a one on one interview with a researcher. Participants will also be asked to talk with a researcher in a small group of five, with other young women of the same age range. The questions will be about the participants television watching and how TV shows impact their ideas about sex and sexuality. Some questions will also be about how participants see themselves represented (or not) on TV shows.

The amount of time required to participate in the study is approximately 45 minutes for the individual interview . On a separate day, participants will be required to spend 1.5 hours in a small group interview.

The only costs associated with the study are the cost to travel to the local study sites (gas expenses or bus fare).

**RISKS AND DISCOMFORTS**

As a participant in this study, I may experience some discomfort when answering personal questions about my ideas about sex and sexuality and what television shows I watch. To help with this discomfort, my name will not be used in the interviews and I’ll be given a number . Also, my answers will be kept private from any school counselors or persons that referred me to this study. A list of resources (Appendix J) is provided at the end of this document for me to use if I experience any emotional discomfort. If I find the interviews too uncomfortable, then I may stop and/or not answer a question. This will remove my data from the study.

**BENEFITS**

There may be no direct benefits of participating in this study; however, the knowledge received may be of value to therapists and educators who work with adolescent females. The knowledge could also be used to help create television shows that represent accurate views of adolescent females.

**ALTERNATIVE PROCEDURES**

The alternative procedure is to not participate in the study.

**CONFIDENTIALITY**

All documents and information pertaining to this research study will be kept confidential in accordance with all applicable federal, state, and local laws and regulations. I understand that data generated by the study may be reviewed by Widener University's Institutional Review Board, which is the committee responsible for ensuring my welfare and rights as a research participant, to assure proper conduct of the study and compliance with university regulations. If any presentations or publication result from this research, I will not be identified by name.

The information collected during my participation in this study will be kept for five years.

My confidentiality will be also protected by using password protected computes and all notes will be maintained in a locked filing cabinet in the university research office. Only the researchers will have access to the data.

**TERMINATION OF PARTICIPATION**

I may choose to withdraw from this study at any time and for any reason. If I choose to drop out of the study, I will contact the investigator and my research records will be destroyed. If I choose to stop the interviews or if I don’t complete both the individual interview and the group interview, my answers will not be included in the research.

**COMPENSATION**

I will receive a $10 WalMart gift card for being in this study. I will receive the gift card once I finish the second (group) interview. There will be no cost to me for participating in this research, other than the costs to travel to the local research sites.

**INJURY COMPENSATION**

Neither Widener University nor any government or other agency funding this research project will provide special services, free care, or compensation for any injuries resulting from this research. I understand that treatment for such injuries will be at my expense and/or paid through my medical plan.

**QUESTIONS**

All of my questions have been answered to my satisfaction and if I have further questions about this study, I may contact Heather Frost at 555-555-5555 or [hfrost@mail.widener.edu](mailto:hfrost@mail.widener.edu). If I have any questions about the rights of research participants, I may call the Chairperson of the Widener University’s Institutional Review Board at 610-499-4110.

**VOLUNTARY PARTICIPATION**

I understand that my participation in this study is entirely voluntary, and that refusal to participate will involve no penalty or loss of benefits to me. I am free to withdraw or refuse consent, or to discontinue my participation in this study at anytime without penalty or consequence.

I voluntarily give my consent to participate in this research study. I understand that I will be given a copy of this consent form.

Signatures:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Name (Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Signature Date

I, the undersigned, certify that to the best of my knowledge, the subject signing this consent form has had the study fully and carefully explained by me and have been given an opportunity to ask any questions regarding the nature, risks, and benefits of participation in this research study.

Heather Frost

Investigator’s Name (Print)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_

Investigator’s Signature Date

Widener University’s IRB has approved the solicitation of participants

for the study until\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Widener University – Department of Education**

**Human Sexuality Program - Child Assent Form**

**PEOPLE DOING THE RESEARCH:** Heather Frost, X.X, Juan Camarena, M.S., Alice Holland, X.X., Coleen Wenzler, X.X

**STUDY TITLE:** Television’s Influence on Female Adolescents’ Sexual Identities and Behavior

**WHY ARE WE DOING THIS STUDY**

The purpose of this research study is to understand if TV gives young females (ages 14-18) ideas about sexuality. The researchers are also interested in understanding if young women feel like they see people like themselves in television shows.

I am being asked to participate in this study because I am between the ages of 14-18, am female, and watch television.

**WHAT WILL HAPPEN IN THE STUDY**

You will be asked to answer questions in a one on one interview with a researcher. You will also be asked to talk with a researcher in a small group of five, with other young women of the same age range. You will be asked questions about the TV shows you watch and the ideas about sexuality that you see. You will also be asked if you see yourself represented in TV shows or not.

The first part of the study will take about 45 minutes and will be a one on one interview . On a separate day, we would like you to participate in a small group interview with four other women in your age range.

**WHY ME?**

You are being asked to be in the research study because we believe you have valuable opinions! Because you are female, between the ages of 14-18, and watch television, you can participate.

**DO I HAVE TO DO THIS?**

No, you can stop the interviews at any time if you feel uncomfortable or want to stop. You can also say “no” to any questions or refuse to answer any questions. Also, if you don’t understand any of the questions from the researchers, you can ask us to use different words.

**WHAT HAPPENS IF I PARTICIPATE?**

After the second interview (the small group), your parent will be given a $10 WalMart gift card.

If you do participate in the interviews, you may feel uncomfortable answering some of the questions because they are about sex and sexuality. You could also feel embarrassed about answering the questions in front of other people in the small group. The researchers agree to keep your privacy, unless you are being hurt by adults, then the researchers have to get you help.

A good thing about participating, is that you can help other people understand your point of view and opinions.

**WHAT IF I HAVE QUESTIONS?**

You can always call or email Heather Frost at 555-555-5555, or hfrost@mail.widener.edu

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature

I agree to be in the study. I can keep a copy of this form.